

Annual enrollment FAQs

Your health insurance: Provided by the Metro Interagency Insurance Program (MIIP)

MIIP is a group of five education organizations in the Cedar Rapids area that combine resources to provide affordable medical and pharmacy insurance to you and your covered family members. Wellmark® Blue Cross® and Blue Shield® administers those benefits on behalf of MIIP.

General questions

1. I'm covered by one of the MIIP health plans, but I'm interested in switching. Can I switch during annual enrollment?

Yes. Annual enrollment is the only time employees can switch to another MIIP health plan. Even if you have a mid-year qualifying life event (e.g., marriage, divorce, birth, death, etc.) you would not be able to switch your MIIP plan, you can only add/remove who is covered.

2. If I change to another plan at annual enrollment, what happens to the deductible I've already met this year? Will I have to start over?

Any deductible and out-of-pocket maximum totals you have accrued within this calendar year on your current plan will carry over to your new plan, including the HDHP Value plan. If you switch to a plan with a higher deductible or out-of-pocket maximum, you will be responsible for the difference.

3. I am not currently covered by one of the MIIP health plans. Can I sign up for any plan?

Yes. During annual enrollment, you may enroll in any plan offered by MIIP, even if you previously waived coverage.

4. Do I need to designate a primary care provider (PCP)?

Only first-time HMO Core and HDHP Value plan members need to select a PCP*. Your selection will be kept until you update it or leave the plan. PPO Core and PPO Choice plan members do not need to select a PCP.

5. Do pre-existing conditions affect my coverage or how much I pay for it?

No. MIIP plans do not have any coverage limitations or exclusions for pre-existing conditions.

6. Will I have prescription drug coverage?

Yes. All MIIP health plans include prescription drug coverage. Please review your plan comparison guide for details.

7. How do I find doctors and hospitals covered by my plan?

You can look up in-network providers online at [Wellmark.com/Finder](https://www.wellmark.com/Finder).

8. Are routine annual preventive exams covered by MIIP plans?

Yes. All MIIP health plans cover one preventive physical each calendar year. Under the Affordable Care Act (ACA), **all in-network preventive care is 100% covered** per the

recommendations of the United States Preventive Services Task Force (USPSTF).

9. I'm planning a family. How can my benefits help?

Along with great coverage, Wellmark provides the Pregnancy Support Program, with free access to one-on-one support and trusted online resources including WebMD® Pregnancy Assistant, Count the Kicks® and Text4baby™. To get started, call the customer service number on the back of your Wellmark ID.

10. Does Wellmark provide support for any other health conditions?

Yes. The Wellmark integrated Care Management Program provides members with additional support for a variety of conditions and situations. Outreach from the program is triggered by your health claims and no action is needed on your behalf.

*All members enrolled in the HMO Core or HDHP Value plans must select a primary care provider (PCP). If you don't choose a PCP, one will be assigned to you (based on your recent visit history and or/proximity to the home address Wellmark has on file for you). You'll be notified when this auto-assignment occurs.

	HDHP Value	HMO Core	PPO Core & PPO Choice
	Blue POS SM /Nationwide	Blue HMO SM /Iowa only	Blue PPO SM /Nationwide
Where can I get covered care?	The Blue POS is an Iowa-based network that provides members with access to care across the state and emergency care nationwide as in network. It also allows access to out-of-network providers nationwide.	Covered care is generally only covered in the state of Iowa and in some surrounding counties. No coverage for providers that are not in the network.	The Wellmark Blue PPO network provides access across Iowa and access to in-network providers nationwide.
Can I get care if I am traveling and do not have access to an in-network provider?	Medical emergencies are covered with an in-network cost share applied. Non-emergency care is also covered, but an out-of-network cost share will be applied. Consider Doctor On Demand [®] by Included Health [®] for non-emergency care.	Care is covered for accidental injuries and other medical emergencies, but general health care is not covered. Consider Doctor On Demand for non-emergency care.	Care is covered nationwide. Consider Doctor On Demand for non-emergency care.
What if I need to get care by providers outside of my network?	Out-of-network benefits apply, unless it is a medical emergency.	No coverage unless it is a medical emergency.	Out-of-network benefits apply.
Is my care covered at the Mayo Clinic?	Mayo Clinic is not in network; however, care is covered at the out-of-network benefit level.	Mayo Clinic is not in network. Care is not covered by this plan.	Mayo Clinic is typically covered, with care processed at in-network rates in most instances.
What about coverage for family members who need to live outside of Iowa?	Guest memberships may be available for those living outside of Iowa for more than 90 days. Contact Wellmark customer service at the number on your ID card for more information.		Care is nationwide.

The HDHP Value plan

The HDHP Value plan from MIIP provides access to both in- and out-of-network providers for great flexibility. Key features of the plan include:

- **Lower premiums; higher deductible:** Members pay the full cost for care until the deductible is met, except with ACA preventive care, which is 100% covered.
- **Expanded network access:** Members get the savings of the HMO network with the ability to see providers out of network.
Note: Services received by out-of-network providers will result in a higher out-of-pocket cost share.
- **HSA eligibility:** Members can open a health savings account (HSA) with triple-tax advantages to help create long-term savings and pay expenses until their deductible is reached. The account balance rolls over each year and is yours to keep, even if you change jobs or retire.

Additional information

Where can I get answers to more of my questions?

- For questions about enrollment and plan options, reach out to your HR/benefits administrator.
- To track your health care spending, research the cost of care, and access other helpful benefit tools, register or log in to myWellmark[®], your secure member portal, at [myWellmark.com](https://mywellmark.com).
- Call Wellmark customer service with questions at 1-800-277-8380.